



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Chen et al.

Application No.: 09/606,367

Filed: June 28th, 2000For: DIFFERENTIAL SENSE LATCH
SCHEME

Examiner: Nguyen, H.

Art Unit: 2816

#4/a
7/9/01
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AMENDMENT

Box Non-Fee Amendment
ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Dear Sir:

In response to the Office Action, dated February 22nd, 2001, please make the following amendments and consider the following remarks. It is noted that a version of the claims with markings appears at the end of this amendment per 37 C.F.R. §1.121.

IN THE CLAIMS

Please amend the claims as follows:

1. (Amended) A circuit comprising:

a differential sense circuit;

a latch;

sub B

said differential sense circuit and said latch being coupled so as to form a differential sense latch such that, in operation, an electronic signal stored in said latch is retained for at least one clock cycle, wherein said differential sense circuit is coupled to said latch in a push-pull configuration.

Cancel claim 2.



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PTO/SB/21 (12/97)

Approved for use through 9/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	09/606,367
		Filing Date	June 28, 2000
		First Named Inventor	Feng Chen
		Group Art Unit	2816
		Examiner Name	Nguyen, H.
Total Number of Pages in This Submission	13	Attorney Docket Number	42390P8530

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kerry D. Tweet, Reg. No. 45,959 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP	
Signature		
Date	June 20, 2001	

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on:

June 20, 2001

Typed or printed name	Angie C. Farr		
Signature		Date	June 20, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																																																
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit any overpayments to:</p> <p>Deposit Account Number 02-2666</p> <p>Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee(s) Required Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p>					<p>3. 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SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Kerry D. Tweet	Registration No. (Attorney/Agent)	45,959	Telephone (503) 684-6200
Signature			Date	06/20/01

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